## **Application Data Sheet**

## **Application Information**

Application Type:: National Phase

Subject Matter:: Utility

Suggested Group Art Unit:: To be Determined

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: DETECTING PROLONGED MYOCARDIAL

REPOLARIZATION INDICATIVE OF CARDIAC

CONDITION

Attorney Docket Number::

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 7

Small Entity?:: Yes

Petition included?::

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David

Middle Name:: Noah

Family Name:: Kenigsberg

City of Residence:: Richmond

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State or Province of Residence:: VA

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Country of Residence:: US

Street of mailing address:: 1234 Kenley Square

City of mailing address:: Richmond

State or Province of mailing address:: VA

Postal or Zip Code of mailing address: 23226

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Nepal

Status:: Full Capacity

Given Name:: Sanjaya

Family Name:: Khanal

City of Residence:: Farmington Hills

State or Province of Residence:: MI

Country of Residence:: US

Street of mailing address:: 37581 Emerald Forrest Drive

City of mailing address:: Farmington Hills

State or Province of mailing address:: MI

Postal or Zip Code of mailing address:: 48331

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Marcin

Family Name:: Kowalski

City of Residence:: Detroit

State or Province of Residence:: MI

Country of Residence:: US

Street of mailing address: 200 Riverfront Drive

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Apartment 17F

City of mailing address:: Detroit

State or Province of mailing address:: MI

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Postal or Zip Code of mailing address:: 48226

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Subramaniam

Family Name:: Krishnan

City of Residence:: Newport Beach

State or Province of Residence:: CA

Country of Residence:: US

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City of mailing address:: Newport Beach

State or Province of mailing address:: CA

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**Correspondence Information** 

Correspondence Customer Number:: 10291

Representative Information

Representative Customer Number:: 10291

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## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2005/004291	02/11/2005
PCT/US2005/004291	An application claiming the benefit under 35 USC 119(3)	60/544,171	2/11/2004

**Foreign Priority Information** 

**Assignee Information**